



E1460
JACC March 12, 2013
Volume 61, Issue 10



Prevention

QUALITY OF LIFE AFTER MYOCARDIAL INFARCTION: FOUR-YEAR FOLLOW-UP OF THE GERMAN MYOCARDIAL INFARCTION FAMILY STUDY

Moderated Poster Contributions

Poster Sessions, Expo North

Monday, March 11, 2013, 9:45 a.m.-10:30 a.m.

Session Title: Prevention: Opportunities for Improvement

Abstract Category: 26. Prevention: Rehabilitation

Presentation Number: 1274M-13

Authors: *Sabine J. Fenk, Ute Hubauer, Wibke Hengstenberg, Christine Meindl, Klaus Stark, Andrea Baessler, Marcus Fischer, Christian Hengstenberg, University Clinic Regensburg, Regensburg, Germany*

Background: Ensuring long-term survival free from adverse events and facilitating a return to normal life are important aims following myocardial infarction (MI). However, long-term data regarding quality of life in MI survivors is limited and often involves comparison with historical controls. The aim of this study was to prospectively assess long-term clinical outcomes and quality of life in MI survivors and contemporaneously recruited controls.

Method: MI survivors from the German MI Family Study and matched familial controls completed SF-36 questionnaires at baseline and 4 year follow up. The SF-36 questionnaire has been used to assess patient perception of health-related quality of life and scores were analyzed to give a physical component score (comprising physical function, physical role, bodily pain and general health perception) and a mental component score (comprising vitality, social role, emotional role and mental health). The composite incidence of death, MI and stroke (MACE) was also calculated.

Results: SF-36 questionnaires were completed by 1,799 MI survivors and 3,513 controls at baseline and 1,085 MI survivors and 2,296 controls at 4 years. Survivors of MI had an increased risk of MACE in comparison to controls at 4 years (14.1% vs. 3.6%; Hazard Ratio=3.9; $P<0.01$). Physical component SF-36 scores were lower in MI survivors in comparison to controls at baseline (43.4 ± 10.9 vs. 48.8 ± 10.0 ; $P<0.01$) and this difference persisted out to 4 years (41.1 ± 11.3 vs. 47.4 ± 10.8 ; $P<0.01$). Mental component SF-36 scores were equivalent in MI survivors and controls at baseline (49.9 ± 10 vs. 50.4 ± 9.4 ; $P=0.84$) and at follow up.

Conclusion: Whilst survivors of MI remain at increased cardiovascular risk in comparison to matched family controls, there was no evidence of an influence of MI on the perception of mental health. However, the reduced perception of physical quality of life seen immediately following MI did not resolve despite long-term survival. Further prospective study of the effect of MI on quality of life is required.